



INVESTMENT PLAN TEMPLATE

HOUSING AND HOMELESSNESS INCENTIVE PROGRAM

July 18, 2022

PURPOSE OF THIS INVESTMENT PLAN TEMPLATE

The Housing and Homelessness Incentive Program (HHIP) is a Medi-Cal Managed Care Plan (MCP) incentive program through which MCPs may earn incentive funds for improving health outcomes and access to whole person care services by addressing homelessness and housing insecurity as social drivers of health and health disparities. The HHIP rewards MCPs for developing the necessary capacity and partnerships to connect their members to needed housing services and taking active steps to reduce and prevent homelessness.

The California Department of Health Care Services (DHCS) is providing this Investment Plan (IP) Template as a required submission for MCPs seeking to participate in the HHIP. The primary goal of the IP is for MCPs participating in the HHIP to demonstrate to DHCS that they have a clear plan for achieving measures and targets across the course of the program, in collaboration with their local partners, through targeted investments in activities and efforts that align with program measures and goals and support the MCP's performance strategies. MCPs will be eligible to earn incentive payments for successful completion and submission of the IP, subject to acceptance of the IP by DHCS. The IP is worth up to 10% of each MCP's allocated earnable funds for HHIP overall. DHCS will evaluate the IP based on the MCP's demonstration of a meaningful investment strategy, including how adequately stated needs are addressed and how effectively funding is targeted, to support the achievement of program measures and goals.

Participating MCPs will be eligible to earn HHIP payments for the successful completion or achievement of HHIP program milestones and measures. Such payments do not constitute pre-funding or reimbursement for investments made using MCP funds in pursuit of program milestones and measures. Once the HHIP payments are earned by the MCP, DHCS does not direct or restrict the MCP's use of the earned incentive funds.

Each MCP must collaborate with the local Continuum(s) of Care (CoCs) to complete one IP per county in which they are participating in HHIP using this Word file template. **Completed IPs must be submitted to DHCS no later than Friday, September 30, 2022.**

HHIP Program Submissions



INVESTMENT PLAN SUBMISSION STRUCTURE

The IP template has the following four components (with associated earnable points) and must be completed in full and submitted to DHCS no later than **September 30, 2022**. DHCS will not accept a submission if any of the components are missing (i.e., an incomplete submission) or unsatisfactory. MCPs participating in the HHIP across multiple counties must submit a separate IP for each county.

- **PART I: Investments:** MCPs must submit a narrative describing specific investments they intend to make to overcome identified housing and service gaps and needs to meet the goals of HHIP. The narrative should include details of anticipated funding activities, investment amounts, recipients, and timelines. For each intended investment, MCPs must specify:
 1. Which HHIP measures each investment is intended to impact; and
 2. Whether each investment will support MCP or provider/partner infrastructure and capacity (or both), or direct member interventions.
- **PART II: Risk Analysis:** MCPs must conduct a brief risk analysis to identify challenges they may face in achieving the HHIP program goals and in making the investments outlined in Part 1. This narrative description will include what steps the MCP might take to address these potential risks and barriers.
- **PART III: CoC Letter of Support:** MCPs must submit a signed letter of support from their CoC partner(s) validating that the CoC(s) collaborated with the MCP, were given an opportunity to review the MCP's IP, and support the MCP's IP. The letter of support should be included with this IP submission **as an appendix**.¹
- **PART IV: Attestation:** MCPs must provide a signed attestation that the IP provides a true representation of the MCP's expected investment plan and strategy for achieving program measures and targets. The attestation must be signed under penalty of perjury by the MCP's Chief Executive Officer or Chief Financial Officer, or equivalent executive officer, or their designee, and included with this IP submission **as an appendix**.

As part of the HHIP submission 1 requirement, MCPs may detail any proposed prospective changes to the IP based on observed impacts and lessons learned from investments made during the measurement period. If prospective changes are not proposed, MCP must submit reaffirmation that the original IP (this submission) remains up to date. Retrospective changes are not allowable.

¹ If an MCP is operating in a county with multiple CoCs, the MCP must obtain letters of support from at least 50% of the CoCs in the county.

MCP INFORMATION

Provide the name and contact information for the MCP submitting this IP response.

MCP Name	Central California Alliance for Health
Lead Contact Person Name and Title	Kate Nester, Program Development Manager
Contact Email Address	knester@ccah-alliance.org
Contact Phone	510 329 6554

PART I: INVESTMENTS

Using the table below, MCPs must submit a narrative describing specific investments they intend to make to overcome existing funding gaps and meet the goals of the HHIP. For each investment activity, MCPs should include details on anticipated:

- I. **Investment Activity:** Investment that will be made throughout CY 2022 and CY 2023 toward achieving the HHIP program goals to (1) ensure MCPs have the necessary capacity and partnership to connect their members to needed housing services, and (2) reduce and prevent homelessness.
- II. **Gap or Need Addressed:** Identify the existing funding gaps or county needs that the investment is intended to address and specify how the MCP identified this gap/need (i.e., in reviewing the HHAP², through conversations with the CoC). Funding gaps and county needs are defined as gaps/needs in housing-related infrastructure, capacity and provider partner capabilities that are not sufficiently funded to meet the needs of Medi-Cal beneficiaries.
- III. **Description:** Details of the investment activity, including anticipated:
 - a. Dollar amount. If the specific dollar amount is not known at this time, the MCP may provide a dollar range, which should be as narrow as possible.
 - b. Recipient(s). If the specific organization is not known at this time, the MCP may provide the type of recipient which should be defined as specifically as possible (i.e., all FQHCs in a defined geographic region, short-term housing shelters in need of beds).
 - c. Timelines for the investment activity, including potential plans for sustainability after the conclusion of the HHIP.
- IV. **HHIP Measures Impacted:** Specify HHIP measure(s) that the investment activity is intended to impact. In total across all investments, a minimum of ten measures that are designated “P4P” in either Submission 1 or Submission 2, or both, must be impacted.
- V. **Domain Targeted:** Specify whether the investment will support MCP or provider/partner infrastructure and capacity (or both), or serve as a direct member intervention.

MCPs may add additional rows to the table submission as needed.

² Materials for each round of HHAP can be accessed on the [HHAP website](#). MCPs should use the HHAP-3 assessment of funding availability to inform their IP submission (or the HHAP-2 assessment, if the HHAP-3 assessment is unavailable).

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
CoC Support	<p>Lack of landlord engagement in housing and homelessness initiatives.</p> <p>The Alliance identified this gap/need through conversations with the CoC.</p>	Provide funding to CoC to establish a landlord engagement and retention program, including a landlord mitigation fund (e.g., landlord recruitment consultant; marketing via Airbnb)	Dollar amount TBD to ensure use of funds do not overlap with existing CS.	The Coalition of Homeless Service Providers	1/2023 – 10/2023	3.5 3.6	Direct Member Interventions
Provider/Partner Support	<p>Additional street outreach capacity to serve people experiencing homeless across the county.</p> <p>The Alliance identified this gap/need through conversations with the CoC and service providers.</p>	Fund direct service providers to expand & improve street outreach countywide, with an emphasis on reaching communities disproportionately impacted by housing disparities and inequities in county.	\$2,500,000 - \$5,000,000	CSUMB Center for Community Health Engagement, Salinas Outreach and Response Team, Access Support Network, Dorothy's Place, Interim, Inc, Community Human Services,	1/2023 – 12/2024	3.3 3.4 3.5 1.6	Provider/ Partner Infrastructure

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
				Downtown Streets Team			
CoC Support	<p>Comprehensive strategy to include the voice of people with lived experience (PLE) in CoC board and workgroups.</p> <p>The Alliance identified this gap/need through conversations with the CoC.</p>	<p>Fund CoC-identified Consultant/ Consulting Firm to develop and implement strategy with CoC to include the voice of people with lived experience (PLE) in CoC board and workgroups, as well as build an equity framework that will build a foundation for the CoC and partners continuing work on equity.</p>	\$50,000 - \$75,000	External consultant	1/2023 – 10/2023	1.6	Provider/ Partner Infrastructure
CoC Support	<p>Add health factors and risks to CES assessment and prioritization process.</p> <p>The Alliance identified this gap/need through conversations with the CoC.</p>	<p>Fund CoC to improve CES needs assessment, referral, and data monitoring processes, including exploration of moving away from VI-SPDAT</p>	\$150,000 - \$300,000	The Coalition of Homeless Service Providers	1/2023 – 12/2023	1.2	Provider/ Partner Infrastructure

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
		assessment tool, and including health factors and risks in the CES assessment and prioritization process.					
CoC Support	<p>Inability for Alliance to match member information with HMIS client information or to receive timely alerts when members experience changes in housing status.</p> <p>The Alliance identified this gap/need through conversations with the CoC.</p>	Fund infrastructure to facilitate interoperability between local HMIS product and Alliance’s data systems, including funding to support staff to provide data feed to the Alliance.	<p>\$15,000 - \$30,000</p> <p>Additional investment anticipated for long term data sharing framework, including infrastructure to facilitate timely alerts</p>	The Coalition of Homeless Service Providers	<p>6/2022 – 12/2022 (member matching)</p> <p>1/2023 – 10/2023 (timely alerts)</p>	2.2	MCP and Provider/ Partner Infrastructure

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
CoC Support	<p>Support community level care coordination and population/policy analytics.</p> <p>The Alliance identified this gap/need through conversations with the CoC.</p>	Fund HMIS Administrator (CoC/CHSP) to provide ongoing data feed to local Health Information Exchange (HIE): Central Coast Health Connect HIE.	\$85,000 - \$160,000	The Coalition of Homeless Service Providers	1/2023 – 10/2023	2.2	Provider/ Partner Infrastructure
Provider / Partner Support	<p>Increase ability for housing-related services providers to actively share MCP member housing status information.</p> <p>The Alliance identified this gap/need through conversations with the CoC.</p>	Fund local providers, CBOs and/or county agencies who are contracted to provide housing-related services to create and operationalize the systems and processes necessary to actively share MCP Member housing status information.	\$100,000 – \$150,000	Local providers, community-based organizations (CBOs) and/or county agencies	1/2023 – 10/2023	1.2	MCP and Provider/ Partner Infrastructure
Provider / Partner Support	Partnerships and strategies to support communities most impacted by housing instability &	Fund external consultant to create and implement strategy to	\$300,000	External consultant	1/2023 – 12/2024	1.6	Provider/ Partner Infrastructure

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
	<p>homelessness.</p> <p>Transition Age Youth (18-24) remain in system shorter and are more likely to return to homelessness</p> <p>Adults with children overrepresented in individuals who become homeless for the first time each year.</p> <p>Individuals identified as Black and African American and Pacific Islander and Native Hawaiian tended to be in the system longer when compared to non-Hispanic and non-TAY White individuals.</p> <p>The Alliance identified this gap/need in reviewing the HHAP-3 and through conversations with the CoC.</p>	<p>address stated disparities and inequities identified in HHAP-3, including informing local orgs of disparate populations & working towards expanding relationships w/ orgs that serve these populations to assure equitable access to CS services to house individuals; as well as working w/ partner orgs to diversify & train workforce to meet needs of communities most impacted by housing instability & homelessness.</p>					
MCP Capacity	Alliance capacity to track and manage referrals to CS.	Fund a discreet system, vendor, or consultant to build internal	\$50,000 - \$66,000	Vendor or consultant	1/2023 – 10/2023	2.3	MCP Infrastructure

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
	The Alliance identified this gap/need through internal conversations, as well as conversations with the CoC.	capacity for tracking and managing referrals for CS providers, as is directly related to HHIP implementation.					

PART II: RISK ANALYSIS

Using the space below, MCPs must submit a narrative response detailing a brief risk analysis for their IP, including:

- I. What factors the MCP anticipates may arise that would make it challenging for the MCP to achieve its goals and the HHIP program goals.
- II. Which aspects of the IP might be affected by those factors; and
- III. What steps the MCP would take to address these factors and avoid or mitigate impact to the IP.

Description of Anticipated Contingencies (500 - 1000-word limit)

Risk: Monterey County CoC has expressed a desire to explore moving away from the VI-SPDAT assessment tool. The process of training and rolling out a new system during HHIP measurement period may be taxing on service providers that already have low bandwidth, potentially hampering ability to achieve various HHIP goals.

- Investments Impacted: Funding streams with service providers as primary recipients
- Mitigation Strategies: No roll out of new system until after measurement period

Risk: Among our three service areas, there is variation in how funding will be administered. For example, in Santa Cruz County the Alliance will contract with the CoC to fund many of HHIP related activities, who will then subcontract with relevant service provider members. Meanwhile in Merced County, the Alliance will largely contract directly with service providers. Due to this variation, throughout the measurement period we anticipate facing challenges in partner alignment in strategic focus on development, execution, and monitoring of the HHIP activities.

- Investments Impacted: All
- Mitigation Strategies: For the duration of measurement period 2, the Alliance will develop and implement a shared leadership oversight structure in each of our service areas, including periodic joint check ins with the CoC and key local service provider partners for each funding stream.

Risk: Lack of capacity from community-based partners to execute HHIP activities.

- Investments Impacted: Funding streams with service providers as primary recipients
- Mitigation Strategies: As additional capacity gaps are identified throughout measurement period 2, the Alliance will consider administering additional funds through the CalAIM Incentive Payment Program (IPP) and/or the Alliance Medi-Cal Capacity Grant Program to supplement HHIP incentive funding.

Risk: Uncertainty that county behavioral health department in our service areas will align with intent to share data, due to low bandwidth and additional legal considerations in sharing patient data related to behavioral health and substance use disorder

treatment.

- Investments Impacted: HHIP Measure 1.5
- Mitigation Strategies: To avoid duplication of effort and align with existing county behavioral health data sharing priorities, the Alliance will align HHIP data sharing activities with the data that county agencies are being incentivized to share with Managed Care Plans under the Behavioral Health Quality Improvement Program.

PART III: CoC LETTER OF SUPPORT

MCPs must submit a signed letter of support from their CoC partner(s) validating that the CoC(s) collaborated with the MCP, were given an opportunity to review the MCP's IP response and support the MCP's IP. For MCPs in counties with more than one CoC, **at least 50% of CoCs** must provide signatures indicating their support.

The CoC letter of support or CoC signature(s) should be included with this IP submission as an appendix.

Part IV: Attestation

MCPs must provide a signed attestation that the IP provides a true representation of the MCP's expected investment plan and strategy for achieving program measures and targets as of the date of signature. The attestation must be signed under penalty of perjury by the MCP's Chief Executive Officer or Chief Financial Officer, or equivalent executive officer, or their designee.

The signed attestation should be included with this IP submission as an appendix.

THE COALITION OF HOMELESS SERVICES PROVIDERS

BOARD

Central Coast Center for
Independent Living

Community Homeless Solutions

Community Human Services

CSU Monterey Bay – CHE
Center

Dorothy's Place

Housing Authority of the
County of Monterey

Housing Resource Center of
Monterey County

Interim, Inc.

MidPen Housing Corporation

The Salvation Army - Monterey
Peninsula Corps

San Benito County Health &
Human Services Agency

Sun Street Centers

Veterans Transition Center of
CA

MEMBERS

Access Support Network

CHISPA

City of Salinas

Downtown Streets Team

Eden Housing

Gathering for Women

Monterey County Department
of Social Services

YWCA Monterey County

09/12/2022

To: California Department of Health Care Services

Re: Housing and Homelessness Incentive Program (HHIP) Investment Plan Letter of Support

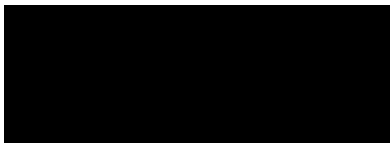
As the Collaborative Applicant CoC CA-506, the Coalition of Homeless Services Providers (CHSP) is pleased to support the California Department of Health Care Services (DHCS) Housing and Homeless Incentive Program Investment Plan(s) (IP) being submitted by Central California Alliance for Health for Monterey County.

CHSP along with Monterey County had the opportunity to engage and collaborate with Central California Alliance for Health for Monterey County provide input on the IP, and were able to review the IP prior to the Medi-Cal managed care plan (MCP) submission. CHSP understands that the IP reflects a non-binding general direction for investments the MCPs are willing to initially make to meet DHCS' HHIP program metrics independent of how the MCPs plan to invest HHIP incentive funds once earned. CHSP also understands that the MCPs' HHIP investments are contingent on the MCPs meeting HHIP measures over the two-year HHIP program.

To this end, CHSP is committed to collaborating with the MCPs as they engage locally to meet HHIP program metrics.

If you have any questions, please feel free to reach out directly

Thank you,



Genevieve Lucas-Conwell
Executive Director

glucas-conwell@chsp.org

Coalition of Homeless Services Providers
CA-506 CoC Lead Agency

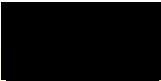
**Medi-Cal Managed Care
Housing and Homelessness Incentive Program (HHIP) Investment Plan (IP)
Certification (to be completed by Health Plan CEO/CFO/COO/Authorized Executive)**

Health Plan: Central California Alliance for Health

County: Monterey

I certify that, to the best of my knowledge, the IP provides a true representation of the MCP’s expected investment plan and strategy for achieving program measures and targets.

As a CEO, CFO, COO, or Executive duly authorized to sign on behalf of the Health Plan listed above, I am authorized or designated to make this Certification, and declare that I understand that the making of false statements or the filing of a false or fraudulent claim is punishable under state and federal law.

By:	<u>Stephanie Sonnenshine</u>	<u>September 30, 2022</u>
	Print name	Date
		
	<u></u>	<u>CEO</u>
	Signature	Title